



**PATENT APPLICATION
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of)
James M. SCHULTZ et al.) Art Unit: 3747
Application No.: 10/613,687) Examiner: Solis, Erick R.
Filed: July 3, 2003)
For: PRE-CHAMBERED TYPE SPARK)
PLUG WITH A FLAT BOTTOM)
BOTTOM BEING ALIGNED WITH A)
BOTTOM SURFACE OF A)
CYLINDER HEAD)
Attorney Docket No.: 02-548)

Peoria, Illinois 61629-6490
November 3, 2004

Mail Stop: Amendment
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

Sir:

AMENDMENT

In response to the Office Action dated August 13, 2004, please amend the above-identified application, as follows:

NOV 01 2004

PTO/SB/21 (02-04)

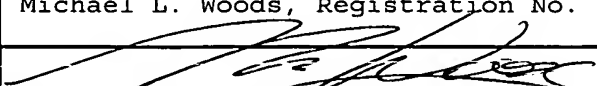
Approved for use through 07/31/2006. OMB 0651-0031

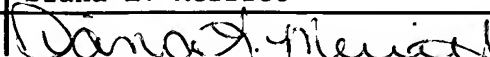
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/613,687
	Filing Date	07/3/2003
	First Named Inventor	William C. Boley ET AL.
	Art Unit	3747
	Examiner Name	Solis, Erick R.
Total Number of Pages in This Submission	Attorney Docket Number	02-548

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosures(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Michael L. Woods, Registration No. 50,811
Signature	
Date	November 3, 2004

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope address to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on this date: 11/03/2004	
Typed or printed name	Diana L. Merritt
Signature	
Date	11-3-04

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